

Brokers

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FEE GUIDE WITH FORM PTO-875)				SERIAL NO.	FILING DATE	
				APPLICANT(S)	10/018887	
CLAIMS						
AS FILED	AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND.	DER.	IND.	DER.	IND.	DER.
1	1	1	1	1	1	
2	1	1	1	1	1	
3	2	2	2	2	2	
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48	2	2	2	2	2	
49	2	2	2	2	2	
50	2	2	2	2	2	
TOTAL IND.	2	2	2	2	2	
TOTAL DER.	109	109	109	109	109	
TOTAL CLAIMS	111	111	111	111	111	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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